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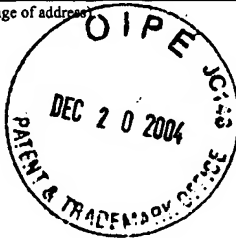
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09/24/2004

ADAMS & WILKS  
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DEBRA BUONINCONTRI

(Depositor's name)

Debra Buonincontri

(Signature)

DECEMBER 15, 2004

(Date)

12/21/2004 RHEBRAH1 00000015 010268 10612566

01 FC:1501 1400.00 OP

02 FC:1504 300.00 OP

03 FC:18001 6.00 DA

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/612,566	07/02/2003	Shinichi Yoshida	S004-5062	4517

TITLE OF INVENTION: THERMAL ACTIVATION DEVICE FOR HEAT-SENSITIVE SELF-ADHESIVE SHEET AND A PRINTER ASSEMBLY EMPLOYING THE SAME

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	<del>\$1320</del> \$1400	\$300	<del>\$1620</del> \$1700	12/27/2004
EXAMINER	ART UNIT	CLASS-SUBCLASS			
TRAN, HUAN HUU	2861	347-171000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

SII P &amp; S Inc.

Chiba-shi, Chiba, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☒ Advance Order - # of Copies TWO (2)

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☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment Deposit Account Number 01-0268 (enclose an extra copy of this form).

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☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

BRUCE L. ADAMS

Date DECEMBER 15, 2004

Typed or printed name

Registration No. 25,386

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